CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each <u>did not exceed \$250.00</u> during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED CANE	COMMITTEE 2. LOBBYIST	3.
NAME OF FILING COMMITTEE, C.				
	Tonn James	Mead Ta.	mie)	
STREET ADDRESS	Dutch Road			
CITY	JIEW .	STATE	ZIP CODE	
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO. PAR	DATE OF ELECTION	era, s.
6TH TUESDAY. PRE-PRIMARY	Judge, Ct of Conn	on Pleas 6th K	FOR OFFICE USE ONLY	2,0
2ND FRIDAY 2. FRE-PRIMARY 3.	DATES OF REPORTING PERIOD	TO 12 31 17		
POST-PRIMARY 6TH TUESDAY PRE-ELECTION	CASH BALANCE AT END OF REPORTING PERIOD:	\$	- JAN 26	į
2ND FRIDAY 5. PRE-ELECTION 6.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIAB AT THE END OF REPORTING PE	ILITIES COMMENT	- J	
POST-ELECTION 7.	AMENDMENT YES	NO		
REPORT	TERMINATION YES	NO		
i ararement is then of	n behalf of a <u>Political Committee or</u> n behalf of a <u>Candidate</u> , the Candid n behalf of a <u>Contributing Lobbyist</u> ,	1916 milet eign hara		
I SWEAR (OR AFFIRM) THAT	THE AGGREGATE RECEIPTS OR DISBURSEMENTS OF FIFTY DOLLARS (\$250.00) AND THIS REPORT IS	AD I LADICITIES INCLUDED DUDING THE		
SWORN TO COMMONW	PARTHEOF PENNSPLVANINIS	Col-C	? ~ 1	
DAY ELECT	OTARIAL SEAL 20	SIGNATURE OF	PRINTED NAME	
My Commission Exp	on Expires May 11, 2018	REA CODE	414-3617 DAYTIME TELEPHONE NUMBER	
ART II -	behalf of a Candidate's Authorized	d Committee, Candidate m	iust sign here.	
I SWEAR (OR AFFIRM) JUNE 3, 1937 (P.L.	THAT TO THE BEST OF MY KNOWLEDGE AND BELIE 1333, No. 320) as amended.	F THIS POLITICAL COMMITTEE HAS NOT	VIOLATED ANY PRÓVISIONS OF THE ACT OF	
SWORN	1	SIGNA	TURE OF CANDIDATE	
	tel*			

Department of State

Bureau of Commissions, Elections and Legislation

10 North Office Building

Harrisburg, PA 17120-0029

(717) 787-5280

DSEB-503 (12-99)